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Revista Stomatologjike Shqiptare është revista zyrtare e Fakultetit të Mjekësisë Dentare, Universiteti i Mjekësisë, Tiranë. Revista botohet në gjuhën shqipe dhe angleze, dy herë në vit.
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ORAL SQUAMOUS PAPILLOMA OF BUCCAL MUCOSA: A CASE REPORT

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Abstract
Oral squamous papilloma is a benign proliferation of the stratified squamous epithelium, which results in a papillary or verrucous exophytic mass,that arise from the mucosal surface. The foremost common site is the palate uvula area followed by tongue,lips and buccal mucosa. The etiology remains unknown. Treatment usually requires total excision and recurrence is rare. Here, we are reporting a case of squamous papilloma in the left side of the buccal mucosa in 50 year old male patient.
Keywords: squamous papilloma, buccal mucosa, tumor,excisional biopsy.

Introduction

Oral squamous papilloma is a common lesion of the oral mucosa. It's a benign proliferation of the stratified squamous epithelium, which ends up in a well demarcated, white or normal colored lesion, that arise from the mucosal surface. The sites of predilection for localization of the lesions include the tongue, lips and soft palate (20%), but any surface of the mouth can be affected.The intraoral papilloma typically is clinically presented as slow growing, well-demarcated lesion, usually with normal coloured mucosa and smooth surface, sessile or pedunculated base, and hard consistency,causing difficulties in mastication and speech. The dimensions of the growth is generally smaller than 1.5 cm.We presenta case of 0,9 cm of squamous papilloma arising from buccal mucosa in oral cavity.

Case presentation

A 50 years old man was referred to the University Dental Clinical Center "St. Pantelejmon", Skopje, North Macedonia. Thus, the patient reported a presence of a "ball" in his mouth approximately three months. Hecomplained on hurting the cheek while eating. This painless ball became ulcerous, started bleeding and accompanied with pain. Nevertheless, the entire medical history revealed no systemic diseases. The left submandibular lymph nodes were non palpable and non tender. The intraoral examination revealed a soft nodule with size 1,0 x 0,5cm, located on the buccal mucosa of the left side, covered by normal and healthy soft tissue. Intraorally on palpation, it was ovoid and firm in terms of consistency (Fig.1).

Figure 1. Preoperative clinical findings

There were no other lesions in the oral cavity, nor extraorally. A provisional diagnosis of Oral squamous papilloma was set.

In the pre-surgical preparation, all the normal range of preoperative routine investigations was collected. It included: complete blood count, coagulation tests and blood pressure examination. The patient underwent surgical excision of the lesion, performed under local anesthesia. Local infiltrative anesthesia (mepivacaine (3%) with vasoconstrictor) was injected around the lesion. This was followed by surgical incision with a scalpel blade No.15 (Fig.2).

Figure 2. Instruments used for specimen removing

After the removal of the lesion, the incision was sutured with 3-0 black silk suture(Fig.3).

Figure 3. Wound suturing

Surgical excision of the lesion was performed with a 1mm depth towards the submucosa. Based on the histopathological confirmation, we set the final diagnosis of "squamous papilloma" and the patient wasinvited for a recall after 10 days.

The histopathological report of surgical biopsyshowselliptical submucosal lesion with 0,9 x 0,6cm wideness and 0,1cm thickness. Connective tissue mass lined by stratified squamous epithelium with signs of acanthosis, parakeratosis, mild papillomatosis, moderate superficial keratosis and koilocytosis. Subepithelially, dermal connective collagen tissue is seen and also scarce chronic inflammatory substrate is found. (Fig.4)

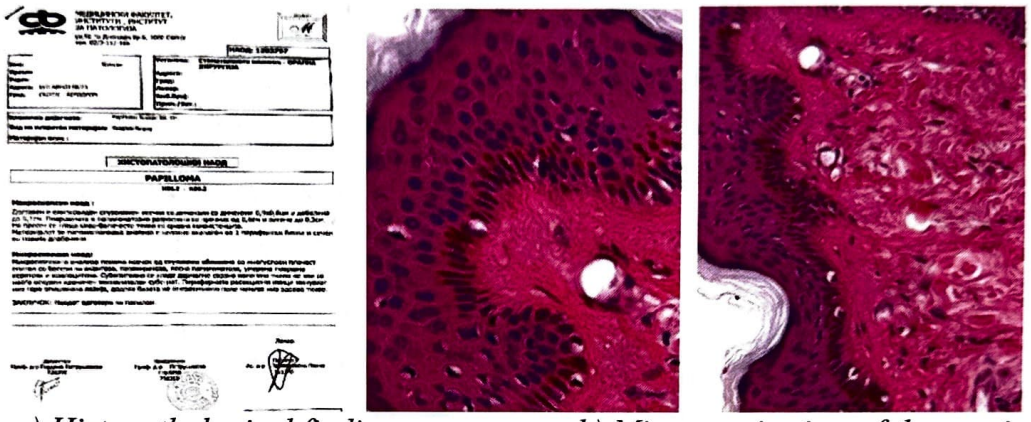

Figure 4. a) Histopathological finding *b) Microscopic view of the specimen*

Discussion

Oral squamous papilloma is a generic term that is used to include papillary and verrucous growth composed of benign epithelium and connective tissue.

Some are pedunculated and others are sessile. Some are single; other are multiple or diffusely involve broad areas of the oral mucosa. The squamous papilloma is the fourth most common oral mucosal mass and forms 3-4% of all biopsied oral soft tissue lesions. It was first reported as a gingival "wart" by Tomes in 1848 and is localized, benign, HPV-induced epithelial hyperplasia. The oral squamous papilloma is usually diagnosed in people between 20-50 years. The common sites are the palate, uvula, tongue and lips. The lesions generally measure less than 1 cm in range. The lesions are generally asymptomatic as shown in our presented case above. Squamous papillomas are traditionally divided into two types: isolated-solitary and multiple-recurring.The exact etiology is unknown but the squamous papilloma is strongly associated with human papilloma virus (HPV).(Table 1)

Table1. Oral disease and associated human papilloma virus Genotypes

Oral disease	Human papilloma virus Types
Verruca vulgaris	2,4
Squamous papilloma	6,11
Condylomata	6,11
Focal epithelial hyperplasia	13,32
Verrucous carcinoma	6,11,16

Although many oral squamous papillomas appear to be virally induced, the infectivity of the HPV must be of a very low order. The path of transmission of the virus is unknown for oral lesions. Surgical removal is the treatment of choice by either routine excision or laser ablation. Any identifiable irritant such as ill-fitting dental appliance and rough restoration should be removed. Long-term postoperative follow-up is extremely important because of the high rate of reoccurrence of incompletely removed lesion.

Conclusion

Clinical results obtained by the use of conventional surgical technique for removing squamous papillomas in 50-year-old patient was satisfactory. The technique has proven to be simple and safe. Moreover, patient discomfort is minimal and healing was rapid and effective.

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ATRICIONI DENTAR; REHABILITIMI TOTAL I NJË DENTICIONI ME ATRICION : RAPORTIM RASTI

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Abstrakt

Atricioni është një dukuri që e po e ndeshim gjithmonë e më shpesh në klinikat tona, madje dhe në mosha të reja. Kjo dukuri bëhet prevalente në individë në moshë të madhe, të cilët si pasojë e sëmundjeve kronike përdorin mjekime të ndryshme që çojnë në tharje të gojës apo regurgitacion. Por vërehet dhe në mosha më të reja, të cilët kanë ndryshime në mënyrën e ushqyerjes duke ndikuar direkt në fluksin e ulët salivar,